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FEC FORM 1	STATEMENT OF ORGANIZATION							Office	Use On	ıly			
NAME OF COMMITTEE (iii	n full)	,	Check if nam changed)		cample:If typi er the lines.	ng, type	12F	E4M5					
American	Society	y of T	ravel A	gents	PAC		1 1 1	1 1 1	1 1	1 1	1 1		I
ADDRESS (number a	and street)	1101 Kir	g St.										
(Check if address is changed)		Suite 20	0							1 1			
		Alexand	ria				VA		22314	-			
				CITY			STATE	Ē		ZIP	COD	E	
COMMITTEE'S E-MA	AIL ADDRES	S (Please	provide only	one e-mail a	address)								
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2. DATE 0	1 10	D / Y	2012										
3. FEC IDENTIFIC	CATION NU	MBER	C	C00114	108								
4. IS THIS STATE	MENT X	NEW	(N) <b>O</b>	R	AMEN	IDED (A)							
I certify that I have	examined thi	s Stateme	nt and to the	best of my	/ knowledge	and belief i	it is true,	correct	and co	omplete	).		
Type or Print Name	of Treasurer	Mrs. De	borah Manga	S									
Signature of Treasur	er Mrs. De	borah Manş	gas		[Electronic	ally Filed]	Date	M M	′ [	10	/ Y	20	12 
NOTE: Submission of			omplete inform						the per	nalties o	of 2 L	J.S.C.	§437g.
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L	Office Use Only				For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2009)
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